

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		3-23-01
O.I.P.E. CLASSIFIER		43	4/11/01
FORMALITY REVIEW	NK	989	5/2/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
20	
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1	✓
2	0
3	✓
4	✓
5	0
6	✓
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10	0
11	0
12	0
13	✓
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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10 H-5.  
 5-3-01